

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FE <sup>2</sup> DETERMINATION			
O.I.F.E. CLASSIFIER			
FORMALITY REVIEW	MAZ	60080	7/10/02
RESPONSE FORMALITY REVIEW	ER	70029	11/29/00

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 - ..... Restricted      O ..... Objected

Note: These claims are re-numbered due to two  
 Claims 18, i.e. the added claims starts from claim 19,  
 not starts from claim 18.

Claim	Final	Original	Date
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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